

Come join us for some spooky family fun! Sat. November 3rd at 1 p.m. to Sun. November 4th at 10 a.m. Kiwanis Recreation Center Ages 3 and older

Capture Those
Special Memories!!
Scenic Photos Available, \$4.
Code: KPFCP-2001



CAMPFIRE

Participants will need to provide their own camping gear, personal supplies and dinner for Saturday night.

- Arts & Crafts
- Wave pool swimming
- Games
- Complimentary breakfast
- And more!

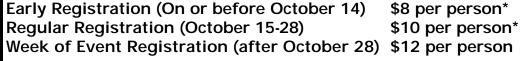




SPACE IS LIMITED REGISTER EARLY!!



Code: KPFC-2001



* Family Discount: Receive a 20% discount when 3 or more people in your family register at the same time. Sorry, family discount is not available for week of event registration.

REGISTRATION FORM ON BACK





Registration Form – Family Campout 2001 (One registration form per participant. PLEASE PRINT) Name: Last______First_____MI____Phone:_____ Address:_____ City:_____ Zip:_____ Grade:_____ Age:_____ DOB:_____ Sex:____ Email address:_____ Parent's Name: _____ Work Phone: _____ Registration Code (see front) _____ Date(s) ____ Amt.: \$_____ Check (Make check payable to City of Tempe) Charge Visa/Mastercard # ______ Exp. Date______ Signature: (to authorize charge) In consideration of accepting this event entry, I do hereby for and on behalf of myself, my heirs, and legal representatives release and forever discharge the City of Tempe and the Kiwanis Park Recreation Center, their officers, committees, representatives and their successors of every kind, nature, and character, from any claim which I may have or hereafter acquire for any and all damages, losses, or injuries which may be suffered or sustained by me in connection with my activities during the said event and all such claims are hereby waived and released and I covenant not to sue therefor. I understand that the City of Tempe does NOT carry accident insurance for this event and I am aware and agree to assume all risks associated with my participation. I will additionally permit the free use of my name and picture in broadcasts, telecasts, newspapers, brochures, web sites, etc. Falsification of any information on this registration form will result in suspension from the program. If I require certain accommodations to participate, I will note them below. DATE____ SIGNATURE___ You can mail or drop off registration form(s) at the Kiwanis Park Recreation Center 6111 S. All America Way, Tempe, AZ. 85283 Ph: (480) 350-5201 (480) 350-5050 TDD **Registration Form – Family Campout 2001** (One registration form per participant. PLEASE PRINT) Name: Last______First______MI____Phone:_____ Address: City: Zip: Grade: ____ Age: ____ DOB: ____ Sex: ___ Email address: ____ Parent's Name: ______ Work Phone: _____ Registration Code (see front) Date(s) Amt.: \$ Charge Check (Make check payable to City of Tempe) Visa/Mastercard # ______ Exp. Date_____ Signature: (to authorize charge)

In consideration of accepting this event entry, I do hereby for and on behalf of myself, my heirs, and legal representatives release and forever discharge the City of Tempe and the Kiwanis Park Recreation Center, their officers, committees, representatives and their successors of every kind, nature, and character, from any claim which I may have or hereafter acquire for any and all damages, losses, or injuries which may be suffered or sustained by me in connection with my activities during the said event and all such claims are hereby waived and released and I covenant not to sue therefor. I understand that the City of Tempe does NOT carry accident insurance for this event and I am aware and agree to assume all risks associated with my participation. I will additionally permit the free use of my name and picture in broadcasts, telecasts, newspapers, brochures, web sites, etc. Falsification of any information on this registration form will result in suspension from the program. If I require certain accommodations to participate, I will note them below.

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